CLAIMS ONLY

Application Number	Filing Date
10/782190	

Applicant(s)

10-17-05

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2				/		
3				/		
4				/		
5				/		
6				/		
7				/		
8				/		
9			1			
10						
11				/		
12				/		
13				/		
14				/		
15				/		
16				/		
17				/		
18			1			
19			/			
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47						
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49						
50						
Total Indep			3			
Total Depend			14			
Total Claims			17			

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	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						